

UNITED STATES DISTRICT COURT

for the

District of Delaware

JOHN R. PURNELL III

Plaintiff(s)

v.

DELAWARE DEPARTMENT OF INSURANCE,
ET.AL.*Defendant(s)*

Civil Action No. 20 - 1058

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* DELAWARE DEPARTMENT OF INSURANCE
1351 W. NORTH STREET
SUITE 101
DOVER, DE 19904

FILED
CLERK U.S. DISTRICT COURT
DISTRICT OF DELAWARE
2020 OCT 28 PM 1:56

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

JOHN R. PURNELL III
24 CORNWALL DRIVE
NEWARK, DE 19711

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

8/25/20



CLERK OF COURT

/s/ John A. Cerino

Signature of Clerk or Deputy Clerk

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Civil Action No. 20-1058.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P.4(l))

This summons & complaint for *(name of individual and title, if any)* **Delaware Department of Insurance** was received by me on **8/26/2020**.

☐ I personally served the summons on the individual at *(place)* _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____, a person of suitable age and discretion who resides there, on *(date)* _____ at _____, and mailed a copy to the individual's last known address; or

☒ I served the summons & complaint on *(name of individual)* **Lisa Little, authorized agent, at c/o Insurance Commissioner, 1351 West North Street, Suite 101, Dover, DE 19904**, who is designated by law to accept service of process on behalf of *(name of organization)* **Delaware Department of Insurance**, on *(date)* **8/27/2020** at **10:46 a.m.**; or

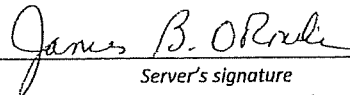
☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*:

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: **8/28/2020**



Server's signature

James B. O'Rourke, Special Process Server

O'Rourke Investigative Associates, Inc.
1225 North King Street, Suite 400
P. O. Box 368
Wilmington, DE 19899-0368

Additional information regarding attempted service, etc: